# **FORM D**

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

#### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL					
OMB Number: 3235-0076					
Expires:	Аргі	il 30,2008			
Estimated average burden					
hourspern	espor	rse16.00			

SEC USE ONLY						
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DATE RECEIVED						

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	t and name has changed, and indicate change.)		<b>-</b>	
LUX-TDC #17, L.L.P	404 El D. 4 404 El D. 4 40	— a=  vi	SEC SEC	JAN 2 8 2008
Filing Under (Check box(es) that apply): Rule: Type of Filing: X New Filing Amendment	504 Rule 505 Rule 506 Section 4(6)	□ GINE	Sections	
Type of I marg.			Section	THOMSON
	A. BASIC IDENTIFICATION DATA	JA	N 22 711110	<del>FINAN</del> CIAI
1. Enter the information requested about the issuer				
Name of Issuer ( check if this is an amendment an	d name has changed, and indicate change.)	Was	hinata	
LUX Petroleum, Inc.			hington, DC	•
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone N	umber (Including A	rea Code)
5050 Quorum Drive, Suite 700, Dallas, TX 75	254	866-594-5897	•	
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone N	(umber (Including A	vea Code)
(if different from Executive Offices)				
Brief Description of Business		_		
•				
Oil and Gas Development				elen elli (BB)
Type of Business Organization				
		please st		
☐ business trust ☐ limited p	artnership, to be formed	iH	08021745	ATTER ONL IREA
	Month Year		00021140	
Actual or Estimated Date of Incorporation or Organizat		mated		
Jurisdiction of Incorporation or Organization: (Enter t	wo-letter U.S. Postai Service abbreviation for State or Canada; FN for other foreign jurisdiction)			
	a canada, 114 for onici foreign jurisdiction)			
GENERAL INSTRUCTIONS				
** * .				

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation Dor Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77.6(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a tederal notice.

A. BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>	
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities	s of the issuer.
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and	
Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director X General and/or Managing Partner	r
Full Name (Last name first, if individual)	<del> </del>
LUX Petroleum, Inc	
Business or Residence Address (Number and Street, City, State, Zip Code)	
5050 Quorum Drive, Suite 700, Dallas, TX 75254	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	r
Full Name (Last name first, if individual)	-
Business or Residence Address (Number and Street, City, State, Zip Code)	<u> </u>
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	<u> </u>
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	r
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	r
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	<del></del>
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	r
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	ſ
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	

					B. D	NFORMAT	ION ABOU	T OFFERI	NG				
•	110 - 40 -	·	4				4 % 4 ?		AL: - 001	0		Yes	No
1.	mas uie	185001 3010	d, or does th			u, to non-a Appendix,				_	*************		X
2.	What is	the minim	ıum investn					•				<b>\$</b> 2	000
۷.	***************************************	ure minim	ium mvom	ikan mar w	iii oc acce	prou mom e	iny marvio	uas:		••••••	***************************************	Yes	No
3.	Does th	e offering	<del>per</del> mit join	t ownershi	p of a sing	le unit?				·····		X	Ö
4.	commis If a pers or states	sion or sim on to be lis s, list the n	ilarremune ted is an ass	ration for s sociated pe roker or de	olicitation rson or age aler. If me	of purchase ent of a brok ore than five	ers in conn cer or deale c (5) person	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in t EC and/or	irectly, any he offering, with a state ons of such		
Ful	l Name (l	Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (N	lumber and	Street, C	ity, State, Z	ip Code)						
Nai	me of Ass	ociated B	roker or De	alcr								-	<del> </del>
Sta	tes in Wh	ich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers		···········	<del></del>			
	(Check	"All State:	s" or check	ind ividual	States)			· · · · · · · · · · · · · · · · · · ·		·····		☐ A	ll States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (l	Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Nai	me of Ass	sociated Bi	roker or De	alcr				<del>-</del> -		<u> </u>			
Sta	tes in Wh	ich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	ind ividual	States)					••••••	····	☐ A	ll States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (l	Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (1	Yumber an	d Street, C	ity, State,	Zip Code)						
Nai	me of Ass	sociated B	roker or De	aler		<u> </u>							<u> </u>
Sta	tes in Wh	ich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	ind ividual	States)					•		☐ A!	ll States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	aiready exchanged.	Aggregate		mount Already
	Type of Security	Offering Price		Sold
	Debt	0	_ s_	0
	Equity	0	_	0
	Common Preferred			
	Convertible Securities (including warrants)	0	_ s_	0
	Partnership Interests	4,023,800	_ \$_	0
	Other (Specify)	0	_ s_	0
	Total	4,023,800	_ s_	0
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	1	Aggregate Dollar Amount of Purchases
	Accredited Investors	0	_ \$	0
	Non-accredited Investors	0		0
	Total (for filings under Rule 504 only)			
3.	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the			
	first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			<b>.</b>
	Type of Offering	Type of Security		Dollar Amour Sold
	Rule 505			
	Regulation A		<b>.</b> \$	
	Rule 504		_	<del></del>
	Total		_	
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		X	0
	Printing and Engraving Costs			0
	Legal Fees		 	0
	Accounting Fees	•	Z S_	0
	Engineering Fees	-	X \$_	0
	Sales Commissions (specify finders' fees separately)	•	Z	0
		•	  X	0
	Other Expenses (identify)		~ ~	

C.	OFFERING PRICE	. NI'MRER	OF INVESTORS.	EXPENSES	AND ISE	OF PROCEEDS

	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C — proceeds to the issuer."	Question 4.a. This difference is the "adjusted gr	053		\$ <u>4</u>	,023,800
<b>5</b> .	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for as check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Par	ny purpose is not known, furnish an estimate a f the payments listed must equal the adjusted gr	md			
			O Din Afl	ments to fficers, ectors, & filiates		ayments to Others
	Salaries and fees		🕱 S	0	_ XS-	0
	Purchase of real estate		🛛 S	0	_ 🛭 🛣 \$_	0
	Purchase, rental or leasing and installation of ma			0	STA 6	0
	and equipment				_ Xs_	
	Construction or leasing of plant buildings and fac		··- 🔀 2	.0	🛛 \$_	0
	Acquisition of other businesses (including the va offering that may be used in exchange for the ass					
	issuer pursuant to a merger)		🕱 <b>s_</b> _	0	_ 🗶 \$_	0
	Repayment of indebtedness		🕱 <b>S</b>	0	_ 🗷 S_	0
	Working capital		🔀 <b>S</b>	0	_ X \$_	4,023,800
	Other (specify):		_ 🛭 <b>S</b>	0	_ <b> X</b>  \$_	0
			_ ⊠ \$	0	_ X\\$_	0
	Column Totals		[X] <b>\$</b>	0	_ (X) \$_	4,023,800
	Total Payments Listed (column totals added)			<b>X</b> \$_	4,023,80	10
		D. FEDERAL SIGNATURE				
sig	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to furnished by the issuer to any non-acc	rnish to the U.S. Securities and Exchange Com	mission, u	pon writ		
lss	er (Print or Type)	Signature	Date			
$\overline{}$	X Petroleum, Inc.	1 lun vio	Janua	ry 15, 20	800	
Na	ne of Signer (Print or Type)	Title of Signer (Print of Type)				
M:	rk D. Long	President and CEO				

# - ATTENTION -

		E. STATE SIGNATURI						
1.		FR 230.262 presently subject to any of the di	-	es No				
		See Appendix, Column 5, for state	response.					
2.		undertakes to furnish to any state administrato imes as required by state law.	r of any state in which this notice is filed	a notice on Form				
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.							
4.	limited Offering Exemption (U	sents that the issuer is familiar with the conditual JLOE) of the state in which this notice is filed den of establishing that these conditions have	and understands that the issuer claiming					
	uer has read this notification and thorized person.	knows the contents to be true and has duly caus	ed this notice to be signed on its behalf by	the undersigned				
Issuct (	Print or Type)	Signature	Date					
LUX Pe	etroleum, Inc.		January 15, 2008					
Name (	Print or Type)	Title (Print or Type)	· · · · · · · · · · · · · · · · · · ·					
Mark C	rk D. Long President and CEO							

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## 2 1 3 5 4 Disqualification Type of security and aggregate under State ULOE Intend to sell (if yes, attach to non-accredited offering price Type of investor and explanation of amount purchased in State investors in State offered in state waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited **Partnership** State Yes No Investors Amount Investors Amount Yes No Interests AL. ΑK ΑZ AR CA co CT DE DC FL GA Ш ID IL. IN IA KS KY LA ME MD MA MI MN MS

APPENDIX

### **APPENDIX** 2 3 4 5 1 **Disqualification** Type of security under State ULOE and aggregate Intend to sell (if yes, attach to non-accredited offering price Type of investor and explanation of amount purchased in State investors in State offered in state waiver granted) (Part C-Item 1) (Part B-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited Partnership State Yes No Investors **Amount** Investors Amount Yes No Interests MO MT NE NV NH NJ NM NY NC ND ОН OK OR PA RI SC SD TN TX UT VT VA WA wv WI

				APP	ENDIX				
1		2	3			5 Disqualification			
	to non-a	I to sell ccredited s in State ⊢ltern 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and explana amount purchased in State waiver		ate ULOE , attach ation of granted) -Item 1)			
State	Yes	No	Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

